



03500.014646

PATENT APPLICATION

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:)	
	:	Examiner: A. Amari
TAKEHIKO NAKAI)	
	:	Group Art Unit: 2872
Application No.: 09/626,738)	
	:	
Filed: July 26, 2000)	
	:	
For: DIFFRACTION OPTICAL)	
ELEMENT	:	June 16, 2003 (Monday)

THE COMMISSIONER FOR PATENTS
P.O. Box 1450
Alexandria, VA 22313-1450

AMENDMENT

Sir:

In response to the Official Action mailed March 14, 2003, the Examiner is respectfully requested to consider and enter the following amendments. The amendments are being presented in accordance with the Revised Format established by the U.S. Patent and Trademark Office, as permitted in the Pre-OG Notice entitled "Amendments in a Revised Format Now Permitted," a copy of which is attached.



In re Application of:

TAKEHIKO NAKAI

Application No.: 09/626,738

Filed: July 26, 2000

For: DIFFRACTION OPTICAL ELEMENT

Docket No. 03500.014646

Examiner: A. Amari

Group Art Unit: 2872

Date: June , 2003

THE COMMISSIONER FOR PATENTS
P.O. Box 1450
Alexandria, VA 22313-1450

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Sir:

Transmitted herewith is an Amendment in the above-identified application.

☒ No additional fee is required.

The fee has been calculated as shown below

CLAIMS AS AMENDED						
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDITIONAL FEE
TOTAL CLAIMS	18	MINUS	77	= 0	x \$9 \$18	0.00
INDEP. CLAIMS	7	MINUS	7	= 0	x \$42 \$84	0.00
Fee for Multiple Dependent claims \$140°/\$280						
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT---						0.00

☐ °Verified Statement claiming small entity status is enclosed, if not filed previously.

☐ A check in the amount of \$____ is enclosed.

☐ Charge \$____ to Deposit Account No. 06-1205. A duplicate copy of this sheet is enclosed.

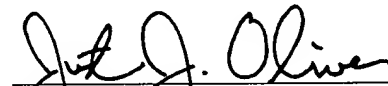
☒ Any prior general authorization to charge an issue fee under 37 C.F.R. 1.18 to Deposit Account No. 06-1205 is hereby revoked. The Commissioner is hereby authorized to charge any additional fees under 37 C.F.R. 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205. A duplicate copy of this paper is enclosed.

☐ A check in the amount of \$____ to cover the fee for a ____ month extension is enclosed.

☐ A check in the amount of \$____ to cover the Information Disclosure Statement fee is enclosed.

☒ Applicant's undersigned attorney may be reached in our Washington, D.C. office by telephone at (202) 530-1010. All correspondence should continue to be directed to our address given below.

Respectfully submitted,



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